

Nicotinamide and Diabetes Mellitus

SIR,—In the *Journal* of June 14, which I have just received on my return from holiday, I noticed a letter from Dr. W. Gordon (p. 863) in reply to my short memorandum on the subject of nicotinamide and diabetes mellitus (March 29, p. 414). I must hasten to correct the erroneous impression under which Dr. Gordon appears to be labouring—namely, that I am in charge of the Diabetic Clinic at Salford Hospital. This is not so, and my observations on the use of nicotinamide in diabetes mellitus were carried out in my capacity as chief assistant to Prof. T. H. Oliver, at Manchester Royal Infirmary, and were not performed at Salford Royal Hospital. I shall look forward with interest to the publication of further observations on this subject by Dr. Gordon, particularly to learn how an increased production of insulin, which he attributes to nicotinamide, may occur without affecting the sugar tolerance curve.—I am, etc.,

Manchester.

H. J. WADE.

General Knowledge and General Practice

SIR,—The reasons for the "distressing lack of culture" in medical students and doctors are the same as those to be found elsewhere. The average boy about to study for one of the professions has a father who is tacitly admitted to be on a lower level of culture than that which the son hopes to reach. Such boys are brought up in households where leisured and informed conversation on a variety of subjects is unknown. From school age onwards they fight against time and examiners. They have no time to read widely, to think deeply, to travel, to make the acquaintance of well-informed persons, and to become aware of their own ignorance. They are caught young and soon begin to know more and more about less and less.

The remedy is early selection, alleviation of financial anxiety, a higher and later standard of general education, and the rising of the age of registration. Our declining civilization cannot provide this. What does the British Medical Association suggest as a palliative?—I am, etc.,

Cricklade, Wilts.

T. R. THOMSON.

Advice to Lay Committees

SIR,—I feel I should report a difficulty in connexion with my work as psychiatrist in charge of the child guidance clinic of a local authority which raises a question of principle. The facts are briefly these: A short time ago I recommended that a patient of mine, an 8-year-old boy, should be sent to a boarding school and, with the mother's agreement, put it forward as a case eligible for assistance from the authority under section 8 (2) (d) of the Education Act, 1944. After much delay and repeated applications an interview was finally arranged, first between myself and two members of the authority's education committee, and then between these members and the child's mother. I was then informed that the committee had rejected the application.

The question of principle involved should be of great concern to the doctors who will next year be brought into close relationship with lay committees. The point at issue is whether, or in what circumstances, a lay committee is entitled to reject specialist medical advice.

In this particular case, the distinction between the function of the committee and of the medical officer was perhaps less clear than in some. The Education Act lays it down that local authorities may assist in the costs of boarding school education for those children whose parents wish for it and for whom the authority considers boarding school education desirable. It is a reasonable view that the "authority" is the elected representatives of the people; but the question is, how should these elected representatives form their opinion? On many matters the only basis is the advice of their technical experts. This would be accepted by all were the advice to be, for instance, sanatorium treatment from a tuberculosis officer, surgical treatment from an orthopaedic specialist, or convalescence from a cardiologist. The difficulty in the present case, leading to confusion of thought, is that the advice was not for any highly

technical treatment. It is therefore assumed that the decision is not come to on the basis of technical or specialized knowledge.

I have not specified here, because I could not without betrayal of confidence, and I did not specify fully to the committee, my reasons for this recommendation. It was, however, based on study of the case carried out over many months, and the recommendation for a change of environment was made because I had reached the conclusion that the environment was responsible for the child's condition. The committee may doubt the wisdom of the advice tendered. The medical adviser may be wrong. It is not part of my argument that I was right—merely that I formed my opinion with information, knowledge, experience, and training not available to laymen. If my conclusions were doubted, was not the correct course for my committee to call for further, and more expert, medical advice?

This particular dispute arose in the relatively new field of psychiatry, where the special qualifications of the doctor may be suspect. Similar difficulties can, and undoubtedly will, arise in other fields unless doctors now face these problems, clarify and define their functions as the servants of public bodies, and work to see that these are understood and respected.

I am, Sir, a supporter of the National Health Service, and in that service the role of lay committees as spokesmen for, and protectors of, the public will be indispensable; but I now see, and stress the danger, that lay committees may interfere with medical treatment, not from lack of good will but from lack of understanding. If we do not now collectively act to prevent this, our patients will suffer, while each individual doctor squanders his substance and his enthusiasm fighting his individual battle.—I am, etc.,

London, W.C.1.

PORTIA G. HOLMAN.

Local Executive Councils in N.H.S.

SIR,—The Regulations (S.R. and O., 1947, No. 889, Part I, 4 (2 and 3)) relating to local executive councils state that one-third of their total number of 24 members (excluding the chairman) are to retire every year and that the order of retirement is to be decided by lot. By this method it is possible that all the seven doctors, or the three dentists, or the two pharmacists *en bloc* may have to retire in the same year.

I think, myself, that this is not the real intention of the Regulations. I believe that it is intended that every electing body should have, as far as possible, an election every year. If this view is correct I suggest that the drawing of lots for the order of retirement should be carried out in sections. Thus, considering the professional half of the council alone, first of all the three dentists should each in turn draw one of three papers marked one, two, or three; then the two pharmacists should each draw from three similar papers; and finally the seven doctors should each draw from two papers marked one, two marked two, and two marked three, together with the one paper left over after the pharmacists have made their draw. In this way, one dentist would retire each year, one pharmacist in two years out of the three, and two doctors in two years and three doctors in a third year.—I am, etc.,

Leeds.

J. H. E. MOORE.

Royal Civilian Medical Corps

SIR,—It is now almost five minutes to twelve, the chalk lines have been drawn on the parade ground, and the markers are taking up their positions. Is it too late to suggest again that it does not require the conscription of the whole profession and the creation of a vast medical trust, with its wastage of scarce resources and its problems of organization and integration almost beyond the wit of man, to ensure that the poorer members of the community shall not be deprived of aid through lack of means? The formation of a Royal Civilian Medical Corps would effect the most precise adaptation of means to an end, both as regards the Government and the profession. Those members who favour a hierarchical medium in which to express themselves, those who have the power urge, those who feel they have latent administrative ability, those who love uniforms, badges of rank, decorations, regular mealtimes,